

6 Cameleca 696 Dorado, PR 00646-3306 DATE: INVOICE # 4/11/2013 16238

11-0052-LS-R2-03 PROPOSAL# CONTRACT # 2012-DS0427

Phone, 787-278-2709 Fex: 787-278-0030

Bill To:

Janet Ros. CXX

Carles Carrasquillo, Project Manager Ext. 2413 The Puerto Rico Department of Health

P.O. Box 70164

San Juan, PR 00936-8184

Plume 787-765-2929

e-mail: carios,carrasquilio@prt/in.net

Janet Rios, CiO Ship To:

Carlos Carrasquillo, Project Manager Ext. 2413 The Puerto Rico Department of Health

P.O. Box 70184

San Juan, PR 00938-8184

Phone: 787-765-2929

e-mail: carios.carrasquillo@prtvn.net

PROJECT NAME: HIE Systems Development							
Account no.	Start Date	Term	Dua Date	Representative			
PRIFAS 255-0710000-081-2010- 1090HT0001SUB & PeopleSoR 256- 0710000-08F-2010-10001SUBHIE	October 1, 2011	30 days	05/11/13	Carlos Cerresquillo, Project Manager			

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
	Deliverable 3; E-t,abs;	1	
1	Phase 3: Testing (Includes (esting for the EHR Integration Testing)	44,500.00	\$ 44,500.00
		SUBTOTAL	\$ 44,500.00
		SALES TAX (7%)	
		SUBTOTAL	44,500.00
		SHIPPING 8 HANDLING	
		TOTAL	\$ 44,500.00

Activities requirements, according to approved proposal # 11-0052-LS-R2-03.

CERTIFICATION:

Under penalty of absolute nullity, I certify that no public servant of the Department of Health is party to or has any interest in the earnings or benefits of the agreement that concerns this invoice, and that should they be party to or have an interest in the earnings or benefits, they have received a prior exemption. The only consideration for providing the goods or services that concern the agreement has been the payment agreed upon with the authorized representatives; the products have been delivered (the services provided) and they have not been paid for.

I CERTIFY THAT THIS IS CORRECT:

Please Remit your payment to:

Mail: Integratek

(Division of Pharma-Bio Serv PR, Inc.)

6 Carretera 696

Dorado, PR 00646-3306

Please forward payment remittance details to:

Integratek

6 Carretera 696

Dorado, PR 00646-3306

ACH: Banco Popular de Puerto Rico

349 Mendez Vigo

Pabellón Comercial Rafaci Hernández Colón

Dorado, PR 00646

Attn: Mariluz Plaza Billings Manager

mplaza@pharmabigserv.com

Ph: 1-787-278-2709

Routing No.: Account No.: 021502011

Fax: 1-787-278-0030

058252045 www.pharmabioserv.com

Thank You For Your Businessi



I, Juan E. Segarra, USCCI #06-067/translator, certify that the foregoing is a true and accurate translation, to the best of my abilities, of the document in Spanish which I have seen.

Case:17-03283-LTS Doc#:24861-2 Filed:08/10/23 Entered:08/10/23 17:02:10 Desc Certified Exhibitionhibit 5 - Invoices - CERTIFIED TRANSLATION Page 2 of 16

Integratek					
Document Title: System Test Case for HIE - EHR Integration					
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No
HIE_STC_001	03	81-Nov-12	Sic Sic	HIE	1 of 27

System Test Case for HIE: EHR System Integration Proposal 11-0052-LS-R2

Approval

Name	Job Title /Role	Signature	Date (DD-MMM-YYYY)					
The Author is signing procedure.	to confirm that this docu	ment has been prepared	in accordance Testing					
Authored by: Baxter Mickey Rains	Integratek PMO Manager		01-Nov-2012					
The [Developer, User] is signing to confirm, for [unit, system, acceptance] level testing, that the Test Steps adequately address the objectives of the Test Case								
Approved by:	HIT Many	N.	12/0/12					

Test Case Iteration Number:



Integratek						
Document Title: System Test Case for HJE + EHR Integration						
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No	
HIE STC 001	03	01 Nov-12	STC	HE	3 of 27	

Table of Contents

1	Tes	st System Identifiers	
	1. 1	User Identifier	
	1.2	Unit/System Identifiers	
	1.3	Document Identifiers	
	1.4	Test Objective Identifiers	
	1.5	Terms and Definitions	
2	Tes	st Objective	
3		st Preconditions	
4		ceability	
5		ferences	
6		st Procedure	
	6.1	New Patient Creation	
	Net	w Patient Creation	
	6.2	New Patient Creation from Existing MPI Profile	
		w Patient Creation from Existing MPI Profile	
	6.3	Prescription Creation	
	Pre	escription Creation	16
	6.4	Surescripts Medication History CCD	22
	Ne	w Patient Creation from Existing MPI Profile	22
	6.5	PRHIE Prescription History CCD	23
	Net	w Patient Creation from Existing MPI Profile	
7	Tes	it Outcome	26
8		pendix 1 – Test Data Requirements	
•	1,177	renew a rest para regulational production from the second	🚣 /



Integratek						
Document Title: System Test Case for HIE - EHR Integration						
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No	
HIE STC 001	03	01-Nov-12	STC)	(A) (A)	5 of 27	

1 Test System Identifiers

Table 1 identifies the system where the test case is being executed.

associated with the execution of this test case within Table 2.

Table 1: System Identifler

System	
Name: HIE	
Version: <u>/./</u>	

1.1 User Identifier Blue U. fr Ver 1.1.4 The Test Manager shall identify all users and their roles, i.e. Prescriber (P) or Pharmacist (Rx),

Table 2: User Identifier

Name	Role	Signature	Initial	Date
				(DD-MMM-YY)
· · · · · · · · · · · · · · · · · · ·				
				1
	j			

1.2 Unit/System Identifiers

Table 3 identifies the units or system and their version being tested within this test case.

Case:17-03283-LTS Doc#:24861-2 Filed:08/10/23 Entered:08/10/23 17:02:10 Desc: Certified Exhibitationhibit 5 - Invoices - CERTIFIED TRANSLATION Page 5 of 16

Integratek					
Document Title: System Test Case for HIE - EHR Integration					
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No
HIE STC DOT	ં 03	01-Nov-12	রা ট	8/ ME *5.83	7 of 27

Integratek						
Document little System Test Case for HIE - FHR Integration						
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No	
HIE STC 001	03	01-Nov-12	SIC	HIE &	9 of 27	

3 Test Preconditions

The following preconditions apply to the tests in this document:

- 1 Data set requirements for prescribers, facilities and pharmacists. Refer to Appendix 2.
- At least one of each category should be created prior test execution.
- The following path will be used to access the HIE application within PRHIE:
 - a. QA: https://staging.prhin.net/orders
 - Staging Internal: https://staging.prhin.net/orders.
 - Staging External: https://staging.prhin.net/orders
- Objectives 1 and 2 can be run independently.
- Objective 4 needs Objective 3 completed.
- Objective 5 can be run independently if prescriptions exist.
- For allergies, Petient 3 shall be entered.
- 8. For Section 6.3, Prescription #7, Patient 4 shall be created. Refer to Appendix 2 section 4 for details.

Integratek						
Document Title System Test Case for HIE EHR Integration						
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No	
HIE STG 000 HIE 1E 0627						

5 References

Document references referred to or relied upon by this document are as follows:

Item	Reference ID	Description
1.74 . 37.9	HIE_UM_001	HE User Manual Prescribers & Agents

Integratek						
Document Title: System Test Cosa for HIE - EHA Integration						
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No	
HIE STC 001	~ % 03 ***	01-Nov-12	s sign	HE	13 01 27	

Test Step	Action	Expected Result	Actual Result	Pass/Fail & Initial
	button.	will be displayed with patient demographic data prepopulated and no search results found. The message displayed should read: "There are no results in the Central Patient Index. Proceed to add the patient."		5°
6.2.3	Press "Add Patient" Button	New patient creation screen is displayed. Most fields should be prepopulated with EHR System demographic data, including Addresses, Next of Kin, Allergies and Conditions, if available.	(Allergies)	[Illegible]
6.2.4	Fill Remaining Patient data and press the "Save Patient" button.	 A new patient profile is created in both MPI and local facility. The patient details screen is displayed. 		pu

dicate whether	Comment (if require	0):
rpected esults were	Cour O	llewa
btained ase/Fall)	[Congs.]	[Allergies]
		er kilosofi. Lengthal
ame of Tester	Signature	Date (DD-MMM-YY)
T 2015 -	()ast	12/6/12
1 / T	Signature	Date (DD-MMM-YY)
lame of Tester ID	Signature	Date (DD-MMM-YY)

ſпtegratek						
Document Title: System Test Case for HIE -EHR Integration						
Document Identifier	Version			Project Number	Page No	
HIE STE DOT		01-Nov-12	\$1C	A STATE OF THE STA	15 of 27	

lest Step	Action	Expected Result	Actual Result	Pass/Fall & Initial
		matching search result.		<u> </u>
6.4.3	Select the matching MPI search result	New patient creation screen is displayed. Most fields should be prepopulated with EHR System demographic data, including Addresses, Next of Kin, Allergies and Conditions, if available.		8r
6.4.4	Fill Remaining Patient data and press the button.	 A new patient profile is created in local facility. The patient details screen is displayed. 	No trajo 20 #Dec-	OT PER

6.2 Test Objective Results The Tester is signing to confirm that the acceptance criteria for this objective have been met or not met.

Indicate whether	Comment (If required):
Expected	
Results yere	
(Pass/Fail)	
I Company of the	

Name of Tester	Signature	Date (DU-MMM-YY)
Tourt (liss	All	12/4/12
Name of Tester ID	Signature	Date (DD-MMM-YY)
Jose-R. Sancher	Col-	2/1/12
2036 K. SMICKEL:	77	

Integratek						
Document Title: System Test Case for HIE EHH Jategration						
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No	
HIE_SIV_GOT		01-Nov-12	STC	AND AND AND A	17 of 27	

Test Step	Action	Expected Result	Actual Result	Pass/Fail & Initial
6.3.9	Enter drug in the "Commercial Name" from the Appendix 2. Press "Search Medication" button.	The window will display a list of medications with the drug entered. "The search includes generics (<drug name="">)"</drug>	Tylond	.OL
6.3.10	Select the drug(s) from the list by pressing on it.	The medication window will display. The medication(s) selected will display at the top of the screen.		or
6.3.11	Enter all drugs for the prescription. 1. Enter the "Quantity" according to the prescription. 2. Select the "Unit" (at the right) according to the prescription	The "Prescription" screen will display with the medication. The medication(s) information corresponds to the one entered.		C/L
6.3.12	Press "Add Prescription" Select the "Define Diagnosis" option	The "Diagnosis Search" window will display.		0~
6.3.13	Enter the word "diabet" in the "Description" field. Press "Search" button.	The window will list diagnostics with the word entered.	-	8~
6.3.14	Select "Code" 253.5 from the list by clicking on the line.	The "Prescription" window will display the medication with the selected diagnostic.		0
6.3.15	"Enter the prescriber signature and press the "Sign" button.	 The "Prescription has been sent successfully" will display. The EHR System should return to the patient record screen. The EHR System should have processed the prescription data, which should now be available in 		Si



Integratek						
Document: Illie: System Test Case for HIE v EHR Integration						
Document Identifier	Version	, , , , , , , , , , , , , , , , , , , ,	Document Type	Project Number	Page No	
HIE STC 001	7.03	01-Nov-12	Service Const	Service Control	19 of 27	

Test Step	Action.	Expected Result	Actual Result	Pass/Fall & Initial
<u>У ў. Р.</u>	. 1. 3/18/2011 - 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	sent successfully" will display.]
	Prescr	ption #3: Two Drugs Interac	tion	
6.3.25	Repeat steps 6.3.1 – 6.3.8, eligibility should be prepopulated Patient Name:	The medication search screen is displayed		S.C.
6.3.26	Enter drug in the "Commercial Name" from the Appendix 2. Press "Search Medication" button.	 The window will display a list of medications with the drug entered. "The search includes generics (<drug name="">)" message will display.</drug> 		04
6.3.27	Select the drug(s) from the list by pressing on it.	 The medication window will display. The medication(s) selected will display at the top of the screen. 	Cipx	Si
6.3.28	Enter all drugs for the prescription. 1. Enter the "Quantity" according to the prescription. 2. Select the "Unit" (at the right) according to the prescription	 The "Prescription" screen will display with the medication. The medication(s) information corresponds to the one entered. Alerts will display 	82	8
6.3.29	Press "Add Prescription" Select the "Define Diagnosis" option	The "Search Diagnosis" window will display		04
6.3.30	Enter the word "diabet" in the "Description" field. Press "Search" button.	The window will list diagnostics with the word entered.		22
6.3.31	Select "Code" 253.5 from the list by clicking on the line.	The "Prescription" window will display the medication with the selected diagnostic.		8
6.3.32	"Enter the prescriber signature and press the "Sign" button.	The "prescription has been sent successfully" will		SV

Integratek					
Document Title: System Test Case for His-EHR Integration					
-	Version	Issue Date	Document Type	Project Number	Page No
HIE STE 001	03	01-Nov-12	STC - 1	HE	21 of 27

Test Step	Action		Actual Result	Pass/Fail & Inittal
	"Description" field. Press	diagnostics with the word		EN
	"Search" button.	entered.		
6.3.39	Select "Code" 253.5 from the list by clicking on the line.	The window will display the medication with the selected diagnostic.		82
6.3.40	Enter the prescriber signature and press the "sign" button.	The "You cannot send prescriptions with CONTROLLED medications, only print them" message is displayed.		80
6.3.41	Press the OK button on the message box, then press the "Print" button.	 The message box closes. A popup is displayed to print the prescription. 		Se.

6,3 Test Objective Results The Tester is si have been met	gning to confirm that the acceptance criteria for this objective or not met.
indicate whether Expected Results were obtained (Pess/Fail)	Comment (if required):

Name of Tester 1D	Signature	Data (DD:MMM-YY)
Jantolos	Ju	12/6/10
Name of Tester ID	Signature	⇒ 'Qate (DD-MMM-YY)
Jose R. Sandes	90	12/6/12

Integratek					
Document Fixle: System Test Case for HIE LEHR Integration					
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No
HIE STC DOIS	03/	01 Nov 122	STC	PARTY OF THE STATE	23 of 27

Test Step	Action	Expected Result	Actual Result	Pass/Fail & Initial
		successfully"	1000	
		The EHR System should receive a CCD document with medication history and must process the data to update the patient's record with medication history.		
6.4.10	Repeat steps 6.4.2 to 6.4.9	The CCD must be processed again by the EHR system, discarding duplicate prescriptions.		

6.4 Test Objective Results	The Tester is signing to confirm that the acceptance criteria for this objective have been met or not met.
	have been met or not met.

Indicate whether Expected Results were obtained (Pasa/Fail)	Comment (if required): ### TO/6// >	
---	--------------------------------------	--

Name of Tester	ID Signature	Date (DD-MMM-YY)
	(4-1)	
Name of Tester	ID Signature	Date (DD-MMM-YY)
_		
Jose R. SANGER		12/6/2012

6.5 PRHIE Prescription History CCD

Test Oblevilve	New Patient Creation from Existing MPI Profile
Acceptance Criteria	 The Surescripts-based Medication History CCD must be processed correctly even if sent multiple times

Station Used to Test Start Completion Perform Test Date/Time Date/Time (DD-MMM-YY (DD-MMM-YY]
--	---



Integratek					
Document Title: System Test Case for HIE AEHR Integration					
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No
HIE STC ON THE 25 OF A POLICY STC					

Name of Tester	ID'	Signatura	DAGE (DD-WMW-YY)
Jantha)	Ju _	13/6/12
Jose 2. Sauch	>		12/6/12

Integratek						
Document Titlef System Test Case for HiE - EHR Integration						
Document Identifier	Version	Issue Date	Document Type	Project Number	Page No	
HIE STC DOY	03	01 Nov 12	\$70	HIF	27 of 27	

8 Appendix 1 - Test Data Requirements

A spreadsheet was prepared outside this document.



DEPARTMENT OF HEALTH

Contracts Office
Department of Health
Commonwealth of Puerto Rico
PO Box 70184, San Juan, PR. 00936-8182

COVER SHEET FOR:

	X Pro	ocedure		Fax		
То:	SR. PEDRO JOSE LASANTA ROBLES PHARMA-BIO SERV PR, INC. 6 CARR. 696 DORADO, PR 00646-3306		From:	SONIA N. CARRASQUILLO COTTO INTERIM DIRECTOR CONTRACTS OFFICE		
Fax No.			Date:	November 23, 2011		
Subject:	DISTRIBUTION OF CONTRACT IN FAVOR OF:					
For ap	•	Take pertinent action Produce copy For your information		Remake with indicated Amendments For your knowledge and records To retain		
Return	nd to sign: signed docur ote and return ate and submit			······································		
Commer	nts:	:		· · · · · · · · · · · · · · · · · · ·		
eceived by	v·			Date:		

Contracts office - Confidentiality Notice: This communication, the notes, and other accompanying documents are for the exclusive use of the intended recipient. If you are not the intended recipient, and you have not been authorized by them to read this communication, you are hereby advised that its contents are CONFIDENTIAL and property of the Department of Health, and that it may contain Health Information, and that it may contain privileged information that is protected by the Law.

